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SOLID WASTE LANDFILL ANNUAL REPORT

FEB 19 2009

For Calendar year 2008

UTAH DIVISION OF
SOLID & HAZARDOUS WASTE

2009.00620

Administrative Information (Please enter all the information requested below)

Facility Name: HANKSVILLE LANDFILL

Facility Mailing Address: PO BOX 189, LOA, UT 84747
(Number & Street, Box and/or Route)

City: LOA Zip Code: 84747

County: _____ Permit Number: _____

Owner

Name: WAYNE COUNTY Phone No.: (435) 836-1300

Owner Mailing Address: _____
(Number & Street, Box and/or Route)

City: LOA State: Utah Zip Code: 84747

Contact Name: BRUCE JOHNSON Contact Title: SUPERVISOR

Contact's Mailing Address: PO BOX 189 LOA, UT 84747

Phone No.: (435) 691-2228 Contact's Email Address: NA

Operator (Complete this section only if the operator is not an employee of the Owner shown above)

Name: _____ Phone No.: _____

Owner Mailing Address: _____
(Number & Street, Box and/or Route)

City: _____ State: Utah Zip Code: _____

Contact Name: _____ Contact Title: _____

Contact's Mailing Address: _____

Phone No.: _____ Contact's Email Address: _____

Facility Type and Status

- ☐ Class I
 ☐ Class IIIb
 ☐ Class V
 ☐ Facility Closed during the year
- ☐ Class II
 ☒ Class IVa
 ☐ Class IV
 Date Closed: _____
- ☐ Class IIIa
 ☐ Class IVb

Annual Disposal (Tons received at the facility for disposal)

Waste Type	Waste Origin		Total	Measurement	
	In-State	Out-of-State		Tons	Cubic Yards
Municipal	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Industrial	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
C/D*	80.2	_____	80.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>

*C/D waste includes all waste going to a Class IV or VI landfill cell

Conversion Factor Used

☒ None Used
 ☐ Site Specific
 ☐ From Rules
 List Site Specific Conversion: _____

RecyclingMaterial Recycled: NAReported in Tons ☐ Cubic Yards ☐**Utah Disposal Fee**Disposal fee required to be paid to State Yes ☐ No ☐Fee paid Municipal: 0 Industrial: 0 C/D: 0 Annual: 0

Municipal, Industrial and C/D are fees paid by Commercial Facilities. Annual fee is paid by facilities operated by a municipality

Current Landfill Remaining CapacityTons: NA Cubic Yards: NA Acre: 80 Years: 94Acres Currently Open: 80 Acres Currently Closed: **Financial Assurance**Current Closure Cost Estimate: 9.266Current Post-Closure Cost Estimate: 17.400Current Amount or Balance in Mechanism: 32,139.14

(If facility permit has been renewed and if balance does not equal or exceed total for closure and post-closure care please contact the Division)

Current Financial Assurance Mechanism: 32,139.14

(ie. Bond, Trust Fund, Corporate or government Test etc.)

Current Financial Assurance Mechanism Holder: PTIF Account #6619

(ie. Name of Bond Company, Bank etc. Account number)

Financial Assurance: Each facility must recalculate the cost of closure and post-closure care to account for inflation and design changes each year. The inflation factor can be found on the Division web page. Facilities that are using a trust account should include a copy of the most recent account statement.

Note Facilities using "Local Government Financial Test" or the "Corporate Financial Test" must provide the information required in R315-309-8(4) or R315-309-9(3) each year.

Other Required Reports to be Submitted with Annual ReportGround Water Monitoring: Class I and V landfills only. Check if exempt ☒Explosive Gas Monitoring: Class I, II and V landfills only. Check if exempt ☒Training Report: A report of all training programs or procedures completed by facility personnel during the year. NASignature: Stanley WordDate: 2/17/09

Signature should be by an executive officer, general partner, proprietor, elected official, or a duly authorized representative. A duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)).

Type Name: Stanley WordTitle: Commissioner